



Office of Intellectual Property Counsel
SMS Research Corporation
10700 Bren Road West
Minnetonka, MN 55343

PATENT

Docket No.

687-456

Amendment Transmittal Letter

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

In re Application of: Harari et al.

Serial No.: 10/005,760

Filed: 11/12/01

For: Bone Suturing Device

Group Art Unit: 3732

Examiner: P. Philogene

RECEIVED
OCT 16 2003
TECHNOLOGY CENTER R3700

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on:

October 6, 2003

Date

Signature -- Linda K. Newton

- Enclosed is an amendment in the above-identified application.
- Enclosed is a Supplemental Information Disclosure Statement
- Enclosed is a Petition for One-month Extension of Time under 37 CFR 1.136(a)
- The fee for this amendment is computed as follows:

| Claims As Amended | | | | | | |
|--|---|-------|--|-------------------------|---|-----------------------|
| (1) | (2) Claims Remaining After Amendment | (3) | (4) Highest No. Previously Paid For | (5) Present Extra | (6) Rate | (7) Additional Fee |
| Total Claims | 20 | Minus | 28 | = 0 | x \$18.00 | = \$0 |
| Independent Claims | 6 | Minus | 7 | = 0 | x \$84.00 | = \$0 |
| Additional fee for filing one or more multiple dependent claims, if no such fee has been previously paid | | | | | \$280 | \$0 |
| | | | | | Total Additional Fee For This Amendment → | \$0 |

** If the "Highest No. Previously Paid For" in this space would be less than 20, write "20" in this space.

*** If the "Highest No. previously Paid For" in this space would be less than 3, write "3" in this space.

- Please charge the fee of \$290.00 to Deposit Account 501921. This amount is calculated \$110.00 (one-month extension) plus \$180.00 (Supplemental IDS).
- Please charge to Deposit Account 501921 any fees under 37 CFR 1.16 and 1.17 which may be required during the entire pendency of this application. This authorization includes the fee for any extension of time under 37 CFR 1.136(a) that may be necessary. To the extent any such extension should become necessary it is hereby requested.

Respectfully submitted,

Signature

Printed Name

Jeffrey J. Hohenshell

| | |
|---------------------|------------------|
| Registration Number | Telephone Number |
| 34,109 | (952) 930-6135 |
| Date | |
| October 6, 2003 | |

| |
|-----------------|
| Signature |
| |
| Printed Name |
| Linda K. Newton |

Certificate of Mailing

Pursuant to 37 CFR 1.8 I certify that this correspondence is being deposited on the date indicated below with the United States Postal Service as First Class Mail addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

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| Signature |
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| Printed Name |
| Linda K. Newton |